

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10747528  
APPLICANT(S)

FILED DATE

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	NO	DEP	NO	DEP	NO	DEP		NO	DEP	NO	DEP	NO	DEP	NO	DEP
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